



SN 09/945,099

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant:	Timothy Orr Knight	Examiner:	Peng Ke
Serial No.:	09/945,099	Group Art Unit:	2174
Filed:	August 31, 2001	Docket:	0006-003004
Title:	INTERFACE AND METHOD ADAPTED FOR CAPTURING SUBJECTIVE PREFERENCES OF PROGRAM USERS		

---

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with 37 C.F.R. §§ 1.97 *et. seq.*, the referenced materials are brought to the attention of the Examiner for consideration in connection with the above-identified patent application. Applicant respectfully requests that this Supplemental Information Disclosure Statement be entered and the documents listed on the attached Form 1449 be considered by the Examiner and made of record. Pursuant to the provisions of MPEP 609, Applicant requests that a copy of the 1449 form, initialed as being considered by the Examiner, be returned to the Applicant with the next official communication.

Pursuant to 37 C.F.R. §1.97(d)(1) and 37 C.F.R. §1.97(e)(1), Applicants state that no item of information contained in the Supplemental Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing the certification after making reasonable inquiry, no item of information contained in the Supplemental Information Disclosure Statement was known to any individual designated in §1.56(c) more than three months prior to the filing of the Supplemental Information Disclosure Statement.

Pursuant to 37 C.F.R. §1.97(d)(2), Applicant has included the fee of \$180.00 as set forth in 37 C.F.R. §1.17(p). Please charge any additional fees or credit any overpayment to Deposit Account No. 50-3521. The Examiner is invited to contact the Applicants' Representative at the below-listed telephone number if there are any questions regarding this communication.

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Page 2

Serial No :09/945,099

Dkt:

Filing Date: August 31, 2001

Title: INTERFACE AND METHOD ADAPTED FOR CAPTURING SUBJECTIVE PREFERENCES OF PROGRAM USERS

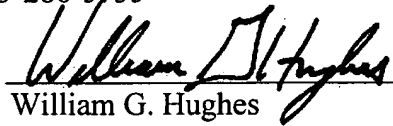
---

Respectfully submitted,

Brake Hughes PLC  
Customer Number 53666  
703-286-5735

Date 11/22/06

By



William G. Hughes

Reg. No. 46,112

**CERTIFICATE UNDER 37 CFR 1.8:** The undersigned hereby certifies that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 22 day of November, 2006.

Laura Bray  
Name

Laura Bray  
Signature



## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

**Complete if Known**

<b>Application Number</b>	09/945,099
<b>Filing Date</b>	August 31, 2001
<b>First Named Inventor</b>	Knight, Timothy
<b>Art Unit</b>	2174
<b>Examiner Name</b>	Ke, Peng

Sheet

1

of

1

Attorney Docket No: 0006-003004

US PATENT DOCUMENTS					
Examiner Initial *	Cite No	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Filing Date If Appropriate
		US-5689651	11/18/1997	Lozman, F.	10/13/1994

FOREIGN PATENT DOCUMENTS					
Examiner Initials*	Cite No	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	T <sup>2</sup>

OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

**EXAMINER**

**DATE CONSIDERED**

Substitute Disclosure Statement Form (PTO-1449)

• EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional) 2 Applicant is to place a check mark here if English language Translation is attached